

GRANT APPLICATION

1. ORGANIZATIONAL PROFILE:

Legal Name of Organization:		Year Founded:	
Addre	2SS:		
City/S	State/Zip		
Executive Director:		Email:	
Busin	ess Phone:	Fax:	
Contact Person:		Title:	
Email Address:		Phone:	
Webs	ite:		
Geographic Area Served:		# of Children Served	
Numb	per of Staff Members: Full Time	Part Time	Volunteers:
Propo	osed Project Name:		
Total Project Budget: \$		Amount Requested: \$	
Missi	on Statement:		
Brief	Program Description:		
Includ	de the following attachments:		
2.	Narrative		
3.	Program Budget		
4.	Audited Financials		
5.	IRS Determination Letter		
			Date:
Contact Signature		Contact Name (Please Print)	Date:
Executive Director/Board Chair Signature		ED/Board Chair Name (Please I	

Applications MUST be submitted <u>via email</u> to <u>Karen.Kazmer@Variety5Detroit.com</u> in <u>one PDF no later than Friday,</u>
<u>April 27, 2018</u>. Audited financials may be sent as a second PDF. *An additional hard copy may be mailed to:*

Michelle Murphy, Executive Director Variety the Children's Charity 600 S. Adams, Suite 230 Birmingham, MI 48009